

20f2

MULTIPLE DEPENDENT CLAIM FEE CALCULATION SHEET (FOR USE WITH FORM PTO-875)							SERIAL NO. <b>097622621</b>		FILING DATE		
APPLICANT(S)											
CLAIMS											
AS FILED		AFTER 1st AMENDMENT		AFTER 2nd AMENDMENT		*		*		*	
IND.	DEP.	IND.	DEP.	IND.	DEP.	IND.	DEP.	IND.	DEP.	IND.	DEP.
10 <sup>1</sup>	0										
10 <sup>2</sup>	0										
10 <sup>3</sup>	0										
10 <sup>4</sup>	0										
10 <sup>5</sup>	1										
10 <sup>6</sup>	1										
10 <sup>7</sup>	1										
10 <sup>8</sup>	1										
10 <sup>9</sup>	1										
10											
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48											
49											
50											
TOTAL IND.	11										
TOTAL DEP.	250										
TOTAL CLAIMS	261										
51											
52											
53											
54											
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57											
58											
59											
60											
61											
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100											
TOTAL IND.											
TOTAL DEP.											
TOTAL CLAIMS											

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MULTIPLE DEPENDENT CLAIM FEE CALCULATION SHEET (FOR USE WITH FORM PTO-875)						SERIAL NO. <b>097622621</b>		FILING DATE					
						APPLICANT(S)							
CLAIMS													
	AS FILED		AFTER 1st AMENDMENT		AFTER 2nd AMENDMENT			*		*		*	
	IND.	DEP.	IND.	DEP.	IND.	DEP.		IND.	DEP.	IND.	DEP.	IND.	DEP.
1	1						51		2				
2		1					52		2				
3		1					53		2				
4		2					54	1					
5		1					55	1					
6		1					56		1				
7		1					57		1				
8		1					58		1				
9		1					59		1				
10		1					60		1				
11		1					61		1				
12		1					62		1				
13		1					63	1					
14		6					64		1				
15		6					65		1				
16		6					66		1				
17		6					67		1				
18		6					68	1					
19		6					69		1				
20		6					70		1				
21		6					71		1				
22		6					72		1				
23		6					73		1				
24		6					74		1				
25		6					75		1				
26		6					76		1				
27		6					77		1				
28		6					78		1				
29		6					79		6				
30		6					80		6				
31		6					81		6				
32		6					82		6				
33		6					83		8				
34	1						84		6				
35		1					85		6				
36		1					86		8				
37		1					87		8				
38		1					88	1					
39		1					89	1					
40		1					90		1				
41		1					91		2				
42		1					92		2				
43		1					93		2				
44		1					94		2				
45		1					95		2				
46		1					96		2				
47		1					97		1				
48		1					98		1				
49		1					99		1				
50		1					100		1				
TOTAL IND.							TOTAL IND.						
TOTAL DEP.							TOTAL DEP.						
TOTAL CLAIMS							TOTAL CLAIMS						

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